



STATE TAX COMMISSION OF MISSOURI

P.O. BOX 146, JEFFERSON CITY, MO 65102-0146

573-751-2414

email: stc@stc.mo.gov

Tax Year **2005****Schedule 14****LOCAL ASSESSMENTS**

* SEE REVERSE SIDE FOR INSTRUCTIONS					
COMPANY MUST FILE THIS SCHEDULE WITH ASSESSOR ON OR BEFORE APRIL 1.					
ASSESSOR MUST FILE THIS SCHEDULE WITH COMPANY, CLERK, AND STATE TAX COMMISSION PRIOR TO APRIL 20.					
NAME OF COUNTY:				SHEET NO.:	
NAME OF COMPANY:				Account Number	
LINE NO.	ITEM	NAME OF MUNICIPAL TOWNSHIP INCORPORATED CITY, TOWN OR VILLAGE	COMPANY'S ORIGINAL COST	TO BE COMPLETED BY ASSESSOR	
				MARKET VALUE	ASSESSMENT
1	Real Property (Submit legal description) (Complete Schedule 15)				
2	Office Furniture and Fixtures				
3	Automobile, Trucks, and Other Vehicles (Complete Schedule 16)				
4	Other General Equipment				
5	Materials and Supplies				
6	Microwave Towers and Equipment (Not used in the movement of Services)				
7	Construction Work in Progress				
8	TOTAL FOR THE COUNTY			\$	\$
9	TOTAL REAL PROPERTY (Lines 1, 6, and a portion of 7)			\$	\$
10	TOTAL PERSONAL PROPERTY (Lines 2, 3, 4, 5 and a portion of 7)			\$	\$
ASSESSMENT MADE BY LOCAL ASSESSOR		SIGNATURE OF ASSESSOR:			

STATE TAX COMMISSION OF MISSOURI  
LOCAL ASSESSMENTS  
Schedule 14

NOTARY INFORMATION			
	STATE OF:		COUNTY OF:
	APPLICANT NAME:		
	BEING DULY SWORN, SAYS HE/SHE IS THE		(TITLE) OF THE
	COMPANY AND THAT THE FOREGOING IS A TRUE,		
	FULL AND COMPLETE DESCRIPTION AND VALUATION OF THE PROPERTY OF SAID		
	COMPANY IN THE COUNTY OF		
	IN THE STATE OF MISSOURI, AD IN EACH MUNICIPAL TOWNSHIP. INCORPORATED		
	CITY, TOWN, OR VILLAGE THEREOF ON JANUARY 1, 2005		
SWORN TO AND SUBSCRIBED BEFORE ME THIS			
		DAY OF	
MY COMMISSION EXPIRES:		NOTARY PUBLIC	
Company			Account Number
Contact Information			Please provide a contact name, address and phone number for the assessor, in case there are any questions or follow-up.
Name, Title			
Address			
City, State Zipcode			
Phone / Fax / email			